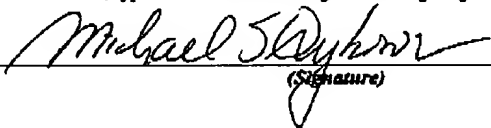



<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			<b>Docket No.</b>
Applicant(s): <b>Hideyuki ISHIKAWA</b>			<b>121027-053</b>
<b>Application No.</b> 09/864,836	<b>Filing Date</b> May 24, 2001	<b>Examiner</b> Karin Reichle	<b>Group Art Unit</b> 2761
Invention: <b>DISPOSABLE DIAPER AND PROCESS FOR MAKING THE SAME</b>			
<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>APR 24 2006</b>			
I hereby certify that this <u>Amdt and Trans., Extension of Time, Notice of Appeal and Fee Transmittal</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u> )			
on <u>April 24, 2006</u> (Date)			
<u>Michael S. Gzybowski</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)			
Note: Each paper must have its own certificate of mailing.			

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					<b>Docket No.</b> 121027-053	
Applicant(s): <b>Hideyuki ISHIKAWA</b>						
Application No. <b>09/864,836</b>	Filing Date <b>May 24, 2001</b>	Examiner <b>Karin Reichle</b>	Customer No. <b>35684</b>	Group Art Unit <b>3761</b>	Confirmation No. <b>4999</b>	
Invention: <b>DISPOSABLE DIAPER AND PROCESS FOR MAKING THE SAME</b>						
<b><u>COMMISSIONER FOR PATENTS:</u></b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	9 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 12-2136 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: April 24, 2006			
Filed via facsimile transmission			<div style="border: 1px solid black; padding: 5px;">         I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____          (Date)          _____          Signature of Person Mailing Correspondence          _____          Typed or Printed Name of Person Mailing Correspondence       </div>			
CC:						

P11LARGEREV09

Doc Code:

PTO/SB/17 (01-08)  
 Approved for use through 07/31/2008. OMB 0851-0032  
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>for FY 2006</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/864,836
<b>TOTAL AMOUNT OF PAYMENT (\$)</b> <b>\$620.00</b>		Filing Date	May 24, 2001
		First Named Inventor	Hideyuki ISHIKAWA
		Examiner Name	Karin Reichle
		Art Unit	3761
		Attorney Docket No.	121027-053

RECEIVED  
 CENTRAL FAX CENTER  
 APR 24 2006

**METHOD OF PAYMENT (check all that apply)**

☐ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit    Deposit Account Number: 12-2136    Deposit Account Name: BUTZEL LONG

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or any underpayments of fee(s) under 37 CFR 1.16 and 1.17    ☒ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2638.

**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	\$50.00	\$0.00
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	\$200.00	\$0.00
HP = highest number of independent claims paid for, if greater than 3.			

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	0	\$250.00	\$0.00
(round up to a whole)				

**4. OTHER FEE(S)**

Non-English specification, \$130 fee (no small entity discount)  
 Other (e.g., late filing surcharge): One Month Extension of Time and Notice of Appeal **\$620.00**

<b>SUBMITTED BY</b>			
Signature	<u>Michael S. Czychowski</u>	Registration No. (Attorney/Agent)	32,816
Name (Print/Type)	Michael S. Czychowski	Telephone	734-995-3110
		Date	April 24, 2006

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.